ا ر ا

PTO/SB/08 (08-03)

Approved for use through 7/31/2008. OMB 0351-0032
U.S. Potent and Tradement Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application of Doctal Number 5			
CLAIMS AS FILED - PART I (Column 2) SMALL ENTITY								OR	OTHER THAN SMALL ENTITY		
FOR NUMBER FILED		FILED	RUMBER EXTRA			RATE	FEE		RATE	FEE	
BASIC FEE (37 CFR 1.16(a))				•			8	OR		8	
TOTAL CLAIMS (37 CFR 1.16(d))								OR	x 8 =		
INDEPENDENT CLAIMS (37 CFR 1.16(b))	2 minus 3					8		OR	x 8 =		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(6))						8 =		OR	+8 s	·	
						TOTAL		OR		<u> </u>	
* if the difference in column 1 is less then zero, enter "O" in column 2.						IUIAL		UK	TOTAL		
CLAIMS AS AMENDED PART II											
(Column 1)			(Cetumn 2) (Cetumn 3)			SMALL ENTITY		OR	SMALL		
	CLAIMS REMAINING AFTER MENDMENT	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TICXIAL FEE		RATE	ADDI- TIONAL FEE	
Total °		inus 👓		13 A ·		8 =	P	OR	x 8 =	, ,	
Total of control of co	2 4	linuo 👓	3	-		8 =		OR	x 8 = _		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.1860)						0		OR		<u> </u>	
					T	OTAL D			TOTAL		
1-24-0					A	DO'L FEE		CR	ADD'L FEE		
	Cclumn 1)	_	(Calumn 2) HIGHEST	(Cotumn 3)							
	REMAINING AFTER MENDMENT	PI	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total (C) C) C	27 1	inus 🗠		•	×	8=		CR	x 8 =		
Independant (37 CFR 1.10(b))	3 "	inus °°°	,2	•/	[x	8=		CR	x 8		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))						8 =	1	OR	÷\$ =		
11-10-No					Ť	OTAL DO'L FEE		CR	TOTAL ADD'L FEE		
10117	Column 1)		(Column 2)	(Cotumn 3)	3 =						
	Claims Remaining After Mendment	Pi	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEB		RATE	ADDI- TIONAL FEE	
Total (37 OFR 1.1Ctcl)		linus ~	27/	•	[x	8=		OR	x s=		
Total A	2 1	inus 👓	3	9	[8		OR	x 8		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(0))								OR	+ 8 =		
					A	OTAL DO'L FEE		OR '	TOTAL ADD'L FEE		
 If the entry in cotun If the "Highest Num If the "Highest Num 	that Previously Pc	d For IN	THIS SPACE	is less than 20.	onter*	20".					

The Highest Number Proviously Ped For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.19. The Information is required to obtain or ration a benefit by the pubble which is to file (and by the USPTO to precess) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.10. This collection is estimated to tate 12 minutes to complete, including galaxing, propering, and authoriting the completed application form to the USPTO. Time will very depending upon the individual case. Any commentation on the amount of time you require to complete the form and/or ouggestion; for roducing this tundon, check to the Chief Information Officer, U.S. Petent and Tradament Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND PRES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commisciologic for Potentia, P.O. Box 1450, Alexandria, VA 22313-1469.